

2-03-01

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EL 759668519 US

UTILITY PATENT APPLICATION TRANSMITTAL

PTO/SB/05 (03-01)

11/30/01

Attorney Docket No.:	CS11336	Total Pages:	2
First-Named Inventor or Application Identifier	Matt Hayek		
Title:	RF RECEIVERS AND METHODS THEREFOR		
Express Mail Label No.:	EL 759668519 US		

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
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1.	<input checked="" type="checkbox"/> Fee Transmittal Form <i>in duplicate</i>	
2.	<input checked="" type="checkbox"/> Specification	Total Pages: <input type="text" value="17"/>
3.	<input checked="" type="checkbox"/> Drawings	Total Sheets: <input type="text" value="4"/>
4.	<input checked="" type="checkbox"/> Oath or Declaration with Power of Attorney	Total Pages: <input type="text" value="4"/>
	a. <input checked="" type="checkbox"/> Newly Executed (original or copy)	
	b. <input type="checkbox"/> Copy from prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed)	
	i. <input type="checkbox"/> Deletion of Inventor(s): Signed statement attached deleting inventor(s) named in the prior application (see 37 CFR §1.63(d)(2) and 1.33(b))	
5.	<input type="checkbox"/> Incorporation by Reference (<i>useable if Box 4b is checked</i>) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
6.	<input type="checkbox"/> Application Data sheet. See 37 CFR 1.76	
7.	<input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission	

ACCOMPANYING APPLICATION PARTS

8.	<input checked="" type="checkbox"/> Assignment Papers (<i>cover sheet and document(s)</i>)
9.	<input type="checkbox"/> 37 CFR §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
10.	<input type="checkbox"/> English Translation Document (<i>if applicable</i>)
11.	<input checked="" type="checkbox"/> Information Disclosure Statement (IDS) Form PTO/SB/08 <input type="checkbox"/> Copies of IDS Citations
12.	<input type="checkbox"/> Preliminary Amendment
13.	<input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>should be specially itemized</i>)
14.	<input type="checkbox"/> Certified Copy of Priority Document(s)

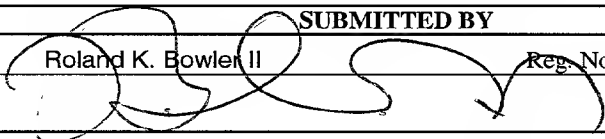
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15.	<input type="checkbox"/> Nonpublication Request Under 35USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent
16.	<input type="checkbox"/> Other:
17.	IF A CONTINUING APPLICATION <i>check appropriate box and supply the requisite information below and, if applicable, in a preliminary amendment:</i>
	<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) Prior Appl. No. _____
Prior Appl. information: Examiner: Group/Art Unit:	

CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/>	Customer Number or Bar Code Label	20280	or	<input type="checkbox"/>	Correspondence address below
NAME	Roland K. Bowler II Attorney for Applicant(s)				
Reg. No.	33,477				
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CITY	Libertyville	STATE	IL	ZIP CODE	60048
COUNTRY	U.S.A.	TELEPHONE	847-523-3978	FAX	847-523-2350

SUBMITTED BY			
NAME	Roland K. Bowler II	Reg. No.	33,477
SIGNATURE			
DATE	11/30/01	Deposit Account User ID	13-4768

PTO/SB/17 (11-00)		FEE		Complete if Known	
TRANSMITTAL		Application Number			
		Filing Date			
Patent fees are subject to annual revision		First Named Inventor		Matt Hayek	
		Examiner Name			
		Group Art Unit			
TOTAL AMOUNT OF PAYMENT		(\$ 994.00)		Attorney Docket No. CS11336	

<p>METHOD OF PAYMENT</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:</p> <p>Deposit Account Number 13-4768</p> <p>Deposit Account Name Motorola, Inc.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table style="width: 100%;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>710</td> <td>201</td> <td>365</td> <td>Utility filing fee</td> <td style="border: 1px solid black;">740.00</td> </tr> <tr> <td>106</td> <td>320</td> <td>206</td> <td>160</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>490</td> <td>207</td> <td>245</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>710</td> <td>208</td> <td>355</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>150</td> <td>214</td> <td>75</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (1)</td> <td style="border: 1px solid black;">(\$ 740.00)</td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table style="width: 100%;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>23</td> <td>-20** = 3</td> <td>18</td> <td>54.00</td> </tr> <tr> <td>Independent Claims</td> <td>5</td> <td>-3** = 2</td> <td>80</td> </tr> <tr> <td colspan="3">Multiple Dependent Claims</td> <td style="border: 1px solid black;">270</td> </tr> </tbody> </table> <table style="width: 100%;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>102</td> <td>80</td> <td>202</td> <td>40</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>104</td> <td>270</td> <td>204</td> <td>135</td> <td>Multiple dependent claim, if not paid</td> </tr> <tr> <td>109</td> <td>80</td> <td>209</td> <td>40</td> <td>** Reissue independent claims Over original patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2)</td> </tr> <tr> <td colspan="5" style="border: 1px solid black;">(\$ 214.00)</td> </tr> </tbody> </table> <p><small>**OR NUMBER PREVIOUSLY PAID, IF GREATER For Reissues, see above</small></p>	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	710	201	365	Utility filing fee	740.00	106	320	206	160	Design filing fee		107	490	207	245	Plant filing fee		108	710	208	355	Reissue filing fee		114	150	214	75	Provisional filing fee		SUBTOTAL (1)					(\$ 740.00)	Total Claims	Extra Claims	Fee from Below	Fee Paid	23	-20** = 3	18	54.00	Independent Claims	5	-3** = 2	80	Multiple Dependent Claims			270	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	103	18	203	9	Claims in excess of 20	102	80	202	40	Independent claims in excess of 3	104	270	204	135	Multiple dependent claim, if not paid	109	80	209	40	** Reissue independent claims Over original patent	110	18	210	9	** Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)					(\$ 214.00)					<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Roland K. Bowler II	Registration No.	33,477
Signature		Telephone	847-523-3978
		Mail Date	11/30/01

CS11336